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Bib Data Sheet

CONFIRMATION NO. 9245

SERIAL NUMBER 09/942,820	FILING DATE 08/30/2001 RULE	CLASS 375	GROUP ART UNIT 2631	ATTORNEY DOCKET NO. 3Com-85
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APPLICANTS

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** CONTINUING DATA *****

NONE JAT

** FOREIGN APPLICATIONS *****

NONE JAT

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 10/03/2001

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	PA	DRAWING 8	CLAIMS 26	CLAIMS 7
Verified and Acknowledged Examiner's Signature	JAT Initials				

ADDRESS

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TITLE

Near end cross-talk and echo avoider for bi-directional digital communications

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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